FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mall Processing Section

FORM D

AUG 052008

Washington, DC

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NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: July 31, 2008 Estimated average burden hours per form......16.00

SEC USE ONLY				
Prefix	Serial			
DATE R	ECEIVED			

Name of Offering (check if this is an ar	nendment and name has cha	nged, a	nd indicate change.)					
Issuance of 1,687,905 of Series A member	ership units and 10,000,000	Comm	ion membership unit	s.				
Filing Under (Check box(es) that apply):	☐ Rule 504		☐ Rule 505	🗷 Rule 50	6	☐ Section 4(6)	□ ULOE	
Type of Filing:		X	New Filing			Amendment		
	A. BA	SIC ID	ENTIFICATION D.	ATA				
1. Enter the information requested about	the issuer							
Name of Issuer (check if this is an ame	ndment and name has chang	ed, and	indicate change.)				. 	
Pinnacle Direct Marketing, LLC								
Address of Executive Offices	(Number and	Street,	City, State, Zip Code)	Telephone	Number (lnc!	\$1181.4944 \$180.4044 \$180.4044	
8500 Higuera Street, Culver City, CA 90232 (310) 840-5000 08057292								
						Number (Inclu.		
(if different from Executive Offices)								
Brief Description of Business								
Product merchandising.			AUC O O	- A				
Type of Business Organization			AUG 2 0	200825				
Corporation	☐ limited partnership, alre	adv for		DELITERA	🗷 other	r (nlease specify): li	mited liability company	
business trust	☐ limited partnership, alre ☐ limited partnership, to b	a form	"", IHOM2ON !	KEUIEKS	_ 0	(prease speerry). III	mice name of the party	
	innited partitership, to e							
Actual or Estimated Date of Incorporation	or Organization	<u>r</u>		<u>Year</u> 2007				
Total of Estimates Date of theorpolation	or organization.	`	•		X	Actual .	☐ Estimated	
Jurisdiction of Incorporation or Organization	•		Service abbreviation	for State:				
	CN for Canada: FN f	or other	r foreign jurisdiction)				DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer,
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that	☐ Promoter	■ Beneficial Owner	Executive Officer	☒ Director	General and/or Managing Partner				
Apply: Full Name (Last name first, if individual)									
Flicker, Jonathan									
Business or Residence Address (Number and Street, City, State, Zip Code)									
	c/o Pinnacle Direct Marketing, LLC, 8500 Higuera Street, Culver City, CA 90232								
Check Box(es) that	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner				
Apply:					Managing Fature				
	t name first, if individual)				,				
Flicker, Blair									
		Street, City, State, Zip Code)	a						
Check Boxes		Higuera Street, Culver City,							
that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
	t name first, if individual)	·			55				
Gould, James									
Business or Res	idence Address (Number and	Street, City, State, Zip Code)							
	t Group, 312 Walnut Street,	Suite 1151, Cincinnati, OH 4	5202						
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Las Levin, Benjam	t name first, if individual) in S.								
Business or Res	idence Address (Number and	Street, City, State, Zip Code)	"						
		Higuera Street, Culver City,							
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	■ Director	General and/or Managing Partner				
Full Name (Las Linton, John	t name first, if individual)								
		Street, City, State, Zip Code)							
		Higuera Street, Culver City,							
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
	t name first, if individual)								
Mayerson, Fro					· · · · · · · · · · · · · · · · · · ·				
		Street, City, State, Zip Code) Suite 1151, Cincinnati, OH 4	5202						
Check Boxes	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or				
that Apply:					Managing Partner				
Full Name (Las	t name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Apply:	•				ranngang ranner				
Full Name (Las	t name first, if individual)		•						
Business or Re	sidence Address (Number and	Street, City, State, Zip Code)							

B. INFORMATION ABOUT OFFERING												
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. Yes No _X												
2.	What is the minimum investment that will be accepted from any individual?								N/A			
3.	. Does the offering permit joint ownership of a single unit?									o <u>X</u>		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
NOT	APPLICABLE											
Full	Name (Last name)	first, if individua	al)									
Busi	ness or Residence	Address (Numbe	er and Street,	City, State,	Zip Code)	.,,. .		· · · · · · · · · · · · · · · · · · ·				
Nom	e of Associated Br	okar or Daglar										
184111	e of Associated Di	okei oi Dealei				•						
	s in Which Person											
·	ck "All States" or		·									
[AL]	• •	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[[D]
[IL]	[IN]	[IA]	{KS}	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	IMSI	[MO]
IMT		INVI	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	, IOHI	[OK]	[OR]	[PA]
[RI] Full	SC Name (Last name :	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	(WI)	[WY]	[PR]
	. varie (East name)	inst, ii marriadi	•••,									
Busi	ness or Residence	Address (Numb	er and Street,	City, State,	Zip Code)							
Nam	e of Associated Br	oker or Dealer										
State	es in Which Person	Listed Has Soli	cited or Inten	ds to Solici	t Purchasers	· · · · · · · · · · · · · · · · · · ·			<u></u>			
(Che	ck "All States" or	check individua	l States)							·····		All States
[AL]	[AK]	[AZ]	JARJ	[CA]	[CO]	ICT I	DE	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	ĮINĮ	ĮΙΑJ	ĮKSĮ	[KY]	{LA	[ME]	[MD]	[MA]	[MI]	IMNI	[MS]	[MO]
ſМТ	j jnej	ĮNVĮ	[NH]	[NJ]	[NM]	[NY]	[NC]	INDI	ЮН .	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	ILNI	ĮΤΧΙ	IUTI	[VT]	[VA]	[VA]	ξWVJ	ĮWĮ	ĮWYJ	[PR]
Full	Name (Last name	first, if individu	al)									
Busi	ness or Residence	Address (Numb	er and Street,	City, State,	, Zip Code)						· · · · · · · · · · · · · · · · · · ·	
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(111)	[ID]
[11]	[18]	[IA]	[KS]	[KY]	[LA]	JMEJ	JMDJ	[MA]	[114]	IMNI	[MS]	JMOJ
IMT	I INE	INVI	{NIII	[NJ]	[NM]	[NY]	INCI	INDI	ронј	JOKI	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	ĮUTJ	[VT]	[VA]	[VA]	ĮWVĮ	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box 🛘 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt Equity П Common Convertible Securities (including warrants)..... Partnership Interests.... Other (Specify: Common and Series A membership units) 2,101,486.00 Total 2.101.486.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors 2,101,486.00 Non-accredited Investors 0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs × \$ 30,000.00 Legal Fees П Accounting Fees

Engineering Fees.

Sales Commissions (specify finders' fees separately)

Other Expenses (Identify)

Total

П

\$ 30,000,00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN		
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer".	and total expenses furnished	\$ <u>2,071,486.00</u>
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for If the amount for any purpose is not known, furnish an estimate and check the box to the left of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Que	e estimate. The total of the estion 4.b above.	DT
	Payment to Officers, Directors, & Affiliates	Payment To Others
alaries and fees	•	□ s
urchase of real estate		□ s
urchase, rental or leasing and installation of machinery and equipment		
onstruction or leasing of plant buildings and facilities		
equisition of other businesses (including the value of securities involved in this offering that may be used a exchange for the assets or securities of another issuer pursuant to a merger)	_	
epayment of indebtedness	· 	□ s
orking capital		× \$ 2,071,486.00
ther (specify):	□ s	□ <u>\$</u>
olumn Totals		**
otal Payments Listed (column totals added)	 *	86.00
	E3 3 <u>2,071,4</u>	80.00
D. FEDERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly authorized person. If this notice n undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written requion-accredited investor pursuant to paragraph (b)(2) of Rule 502.		
suer (Print or Type) Signiture		Date
innacle Direct Marketing, LLC		Augus > 5, 2008
fame of Signer (Print or Type) Title of Signer (Print or Type))	
onathan Flicker Chief Executive Officer		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
ŧ.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? N/A	Yes	No 🗷
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. N/A

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

person.		
Issuer (Print or Type)	Signature	Date
Pinnacle Direct Marketing, LLC	mon	August 5,2008
Name (Print or Type)	Title (Print or Type)	
Jonathan Flicker	Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

